



State of Washington ANNEXATION CERTIFICATE

Office of Financial Management, Forecasting Division, 450 Insurance Building, PO Box 43113, Olympia, WA 98504-3113

IMPORTANT: The following documents must be attached with this certificate (RCW 35.13.260 and 35A.14.700):

1. **Three copies of the final ordinance** containing the legal description of the annexed area;
2. **Three copies of a map clearly showing annexed area and existing city limits** on an 8½"x11" or an 8½"x14" size paper. Outline the annexation boundaries in **red**; outline *former* city limits in **green**. Maps should conform to acceptable engineering standards, including directional arrow, scale, street designations, rivers, and other relevant physical characteristics; and,
3. **The original, handwritten Special Population Census Sheets** used to enumerate the population and housing of the annexed area and all census summary sheets. Census procedures and definitions must follow the Office of Financial Management's (OFM) Enumerator's Manual. Duplicate copies of the census are not needed. Please contact OFM for census manuals and forms at (360) 902-0597 or (360) 902-0599 or www.ofm.wa.gov.

City/Town _____ County _____

Name of the Annexation (if any) _____

Original Ordinance Number _____ Amending Ordinance Number (if applicable) _____

Date Passed _____ Date Passed _____

Date Published _____ Date Published _____

Ordinance Effective Date _____ Ordinance Effective Date _____

Annexation Effective Date _____ Annexation Effective Date _____

Statute(s) Authorizing Annexation: RCW _____

Was a boundary or Annexation Review Hearing Required? Yes _____ No _____ If yes, date of hearing _____

Annexation Area (in acres) _____ Population and Housing Census: _____

Housing Units _____

Occupied Housing Units _____

Population _____

CERTIFICATION: *I hereby certify that, to effect the above annexation, all legal requirements have been satisfied, and that the data set forth in this certificate, including the attached documents, are true and correct.*

[CITY SEAL] (Mayor) _____ Date _____

Attest: (City/Town Clerk) _____ Date _____

OFFICE OF FINANCIAL MANAGEMENT RECORD

The requirements of RCW 35.13.260 or 35A.14.700 have been met. I recognize this annexation as a part of the city for the purpose of developing official population estimates (RCW 43.62.020). This certification is for the limited purpose referenced above.

Date Received _____

Date Approved _____

State Certifying Official _____ OFM File Number _____

(White) Office of Financial Management
(Canary) Department of Transportation
(Pink) Return to City/Town

Carbon Needed - 3 Copies
Original Signature Each Copy